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Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850)205-0383

## From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.  
Account Number : I20010000025  
Phone : (305)935-3500  
Fax Number : (305)935-9042

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DIVISION OF CORPORATION

## LIMITED LIABILITY AMENDMENT

## SCHOONER BAY PLAZA LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

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M. Thomas SEP 1 - 2005

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**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
SCHOONER BAY PLAZA LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
The principal address, mailing address and the addresses for each of the

Managing-Members are incorrect. The correct address is:

4941 SW 80th Street, Miami FL 33143.

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:

Dated: August, 2005

  
Signature of a member or authorized representative of a member

Lisa Ramos

Typed or printed name of signer

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**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

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**Article I**

The name of the Limited Liability Company is:  
SCHOONER BAY PLAZA LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
12390 S.W. 82ND AVENUE  
PINECREST, FL. US 33156

The mailing address of the Limited Liability Company is:  
12390 S.W. 82ND AVENUE  
PINECREST, FL. US 33156

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
LEOPOLD, KORN & LEOPOLD, P.A.  
20801 BISCAYNE BLVD.  
SUITE 501  
AVENTURA, FL. 33180

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: NORMAN LEOPOLD

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**Article V**

The name and address of managing members/managers are:

Title: MGRM  
PAUL KATSIKOS  
12390 S.W. 82ND AVENUE  
PINECREST, FL. 33156 US

Title: MGRM  
KENNETH GOLDRING  
12390 S.W. 82ND AVENUE  
PINECREST, FL. 33156 US

Title: MGRM  
LISA RAMOS  
12390 S.W. 82ND AVENUE  
PINECREST, FL. 33156 US

Signature of member or an authorized representative of a member

Signature: LISA RAMOS

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